## Q1 If there is strong evidence to suggest collusion, what action should be taken?

Answered: 46 Skipped: 0



| Answer Choices   | Responses |    |
|--|-----------|----|
| Void the whole round for all participants                                    | 6.52%     | 3  |
| Void the affected case for all participants                                  | 26.09%    | 12 |
| Award a zero score to all those suspected of colluding for the whole round   | 6.52%     | 3  |
| Award a zero score to all those suspected of colluding for the affected case | 17.39%    | 8  |
| Other (please comment)   | 43.48%    | 20 |
| Total  |           | 46 |

| # | Other (please comment) | Date |
|---|------------------------|------|
|   |                        |      |

South East England Histology EQA Scheme Collusion Survey 2016

| 1  | I am not sure what punitive action would be appropriate, although option 4 is probably closest if it is deemed absoutely necessary  | 7/18/2016 8:20 AM  |
|----|---|--------------------|
| 2  | Issue a warning to those suspected of collusion   | 7/17/2016 10:26 AM |
| 3  | Question suspected participants prior to any action   | 7/13/2016 6:05 PM  |
| 4  | See comments  | 7/13/2016 9:06 AM  |
| 5  | Write to Head of Dept and Participant with evidence   | 7/13/2016 8:41 AM  |
| 6  | Name one of the participants to look after that collusion does not happen.  | 7/13/2016 8:16 AM  |
| 7  | Nothing to participants but may be it is time for those deciding on the cases for the circulation to reflect and look into the reasoning behind it (see comments below).  | 7/12/2016 4:19 PM  |
| 8  | Those suspected of colluding should be informed by a letter not to do so.   | 7/12/2016 2:27 PM  |
| 9  | Do nothing or encourage submission prior to discussion in those individuals.  | 7/12/2016 1:46 PM  |
| 10 | zero score for individual(s) for round or case but must be proven   | 7/12/2016 1:23 PM  |
| 11 | No action   | 7/12/2016 1:12 PM  |
| 12 | Award extra CPD points for safe practice  | 7/12/2016 1:01 PM  |
| 13 | Do nothing  | 7/12/2016 12:37 PM |
| 14 | I would suggest each suspected case should be investigated on its merits and the evidence. The eqa runs the risk of serious legal penelty if they acted on a suspicion of collusion, and it was finally proven that none occurred. The affected individual I would imagine would seek significant redress for defamation. | 7/12/2016 12:19 PM |
| 15 | No changes require  | 7/12/2016 12:13 PM |
| 16 | Accept all answers. "indications that collusion MAY be happening". Not proven!  | 7/12/2016 11:38 AM |
| 17 | Take no action  | 7/12/2016 11:37 AM |
| 18 | this is a serious charge and you would have to be very sure before taking any draconian measures  | 7/12/2016 11:34 AM |
| 19 | Investigate further   | 7/12/2016 11:26 AM |
| 20 | strong evidence is not proof  | 7/12/2016 11:23 AM |

## Q2 Do you have any further comments regarding suspected collusion?

Answered: 31 Skipped: 15

| #  | Responses   | Date               |
|----|---|--------------------|
| 1  | Add a disclaimer to the submitted result for stating that this is all your own work.  | 7/18/2016 8:53 AM  |
| 2  | I am unsure how collusion can be confidently proven and thus acted upon but I do recognise the issue as important, and a frank discussion around it may highlight the importance of independant answering to participants and decrease its likelihood.  | 7/18/2016 8:20 AM  |
| 3  | Very difficult to prove that collusion is occurring   | 7/17/2016 10:26 AM |
| 4  | We all accept that the EQA is only a rough measure (if at all) of a pathologists diagnostic abilities. However, any measure of competence is completly lost if active collusion takes place. This should be strongly discouraged.   | 7/15/2016 3:21 PM  |
| 5  | My opinion is guarded as for simple cases people can think alike and possibly give the same score 10.   | 7/15/2016 7:12 AM  |
| 6  | Action should be taken if it is proved beyond doubt that this is true collusion. Many times with the similar training, participants may come to the same conclusion and use similar terminology. Will this be discussed in the AGM?   | 7/14/2016 8:50 AM  |
| 7  | Difficult to prove.   | 7/13/2016 10:28 AM |
| 8  | Bring to attention of all participants at AGM, no penalty this time, but zero score for affected case in future.  | 7/13/2016 9:06 AM  |
| 9  | Examples of the evidence would be useful to see. I assume some depts participants all submit the same "odd" answer, but perhaps that is a reflection of the teams view of that subject (rightly or wrongly). In which case education of whole team would be required.   | 7/13/2016 8:41 AM  |
| 10 | I believe many departments including ours seek each others opinion in certain cases for patient safety and when the reporting consultants have worked together for many years resulting in a learning process from each other and develop more or less a similar approach to cases, which in EQA scheme may appear as collusion and may not be genuine and I strongly believe that this should be taken into account. In addition the question does not indicate what kind of evidence, like complaint or what because I believe its not a good practice to assume, if that could be clearified, it would be easier to answer. My answer is based on genuine evidence of collusion. | 7/13/2016 8:16 AM  |
| 11 | It would probably help if cases submitted were appropriate to an EQA scheme. Recent cases seem to increasingly fall into specialist reporting and it is not surprising if participants discuss these. In fact it is educationally beneficial. The EQA seems to have become more of a black box scheme, which makes it more interesting, but you have to bear in mind that peoples careers can be affected by poor performance, so again no surprise if individuals collaborate.   | 7/12/2016 7:01 PM  |

## South East England Histology EQA Scheme Collusion Survey 2016

| 12 | The problems lie with a number of EQA cases do not actually reflect real clinical practice, particularly as a number of them do not have all the required panel of diagnostic immunohistochemistry available to the participants (some crucial immunos are even unavailable; ?not done ?purposely omitted). If an H&E only provided, the cases should be typical (even though if they are rare variant) and diagnosable based on one slide only. In real practice, further levels, extra blocks and a panel of immunohistochemistry will be available for assessment. Secondly participants for general histopathology EQA include those working in district general hospitals, and mostly deal with diagnostic biopsies. For some, certain specialties are no longer available within their hospitals. The scheme does not actually allow selection of specialties and thus, for these pathologists, those specialties become almost aliens. I think some EQA cases are in fact cases for experts. Pathologists should exert judgement as when they realise their expertise in certain fields is limited, discussions between pathologists in fact in real practice reflect good/safe pathology practice and knowing when to refer to a specialist is an important skill to real pathology practice, otherwise, things can be unsafe. The current case consultation also causes confusion. Straight forward cases will reflect in the limited range of answers. Problematic cases a variety of answers and therefore exclude. | 7/12/2016 4:19 PM  |
|----|--|--------------------|
| 13 | Collusion sounds bad - in the real world, a difficult case would be shown to colleagues for an opinion as this is the safe way to practice. I do not agree with penalising people for perfoming in the same way they would in routine practice - case consultation in routine practice indicates an awareness of ones own limitations and also is likely to lead to the correct diagnosis for the patient. An EQA scheme which doesn't allow this is not representative of routine practice and therefore cannot be used as a measure of safety and competence.  | 7/12/2016 3:49 PM  |
| 14 | A statement with each EQA advising not to discuss cases would also be helpful.   | 7/12/2016 2:27 PM  |
| 15 | "Suspect" Encourage submission prior to discussion. The eqa should mimic real life including education so that may include discussion, reading etc.<br>Members can still evaluate their own diagnostic opinions.   | 7/12/2016 1:46 PM  |
| 16 | Should be proven rather than suspected. What about using the same (range of) book(s) or working together often & use same terminology  | 7/12/2016 1:23 PM  |
| 17 | This is not the role of the EQA scheme to police individual responses.   | 7/12/2016 1:12 PM  |
| 18 | I disagree with the statements about discussion of cases above. The purpose of EQA is to promote and ensure safe practice, not to artificially 'test' an individual's ability. EQA should reflect real life; it should not be an attempted examination of knowledge.   | 7/12/2016 1:01 PM  |
| 19 | Caution the participants suspected of colluding. This EQA round had 'odd' cases which should not have been included, or included as educational cases.   | 7/12/2016 12:37 PM |
| 20 | I understand the eqa must be completed alone, but in many ways that goes against the very way we all practise Histopathology - in a collaborative and mutually supportive way. I would imagine every member of the scheme would ask a local colleagues advice a number of times a week and would seek expert opinion at least once a month - I know I do.  | 7/12/2016 12:19 PM |
| 21 | I have always complied with this principle and always complete the EQA without asking or discussing with my colleagues. That means, from tme to time, I get some wrong. No problem, because then I consult the digital images and learn from the experience. Collusion is cheating and voids the objective and principle of the EQA.   | 7/12/2016 12:12 PM |
| 22 | hold a meeting to discuss. ? a warning letter written to those suspected of colluding.   | 7/12/2016 12:01 PM |
| 23 | Stop including cases that are unlikely to be reported without 2nd/specialist opinion.  | 7/12/2016 11:38 AM |
| 24 | The EQA should reflect normal diagnostic practice.   | 7/12/2016 11:37 AM |
| 25 | I think it is difficult to prove collusion, and therefore participants may potentially lose marks unfairly. Therefore, to avoid this, the affected case should be voided for all participants.   | 7/12/2016 11:35 AM |
| 26 | there are reasons why there may appear to be collusion such as certain cultural ways of reporting in departments This stance is completely unhelpful. It certaintly will not reveal hidden incompetance and could possibly lead to legal challenges by the accused .Why poke the snake   | 7/12/2016 11:34 AM |
| 27 | presumably there was no collusion for the latest educational lymphoretic case - there are more suggested diagnoses there than the whole new WHO classification!!!!   | 7/12/2016 11:32 AM |

## South East England Histology EQA Scheme Collusion Survey 2016

| 28 | How would you confirm it before penalizing, as others not involved may also be affected   | 7/12/2016 11:31 AM |
|----|---|--------------------|
| 29 | Whilst I am tempted to say "award a zero score to those suspected of colluding", the problem will be that unless one can prove it, it will be open to challenge. Also if you decide you are certain of collusion then will you have to inform the GMC of dishonest behaviour? This looks like a can of worms.   | 7/12/2016 11:30 AM |
| 30 | All of the options described are rather 'nuclear' in approach. Unless it can be definitively proven that collusion has occurred than I don't think they are appropriate.  | 7/12/2016 11:26 AM |
| 31 | Since you are implying a lack of integrity from participants I think you need more than 'indications'. Following your suspicions I think you should write and warn the people concerned telling them what your evidence was and then in a future round either it won't happen or maybe you can prove it did. Evidence of a lack of integrity in this way is a potentially career ending suspicion and individuals must have the opportunity to defend themselves, with the help of their advisors if they choose. I cannot be at the meeting, but please make these thoughts known. I have trade union experience and there is a big step between 'suspected impropriety' and acting as if it were proven and therefore future GMC etc might consider it proven. I am happy to give more thoughts and could speak to someone with more knowlege than me if that would help. Best wishes Gemma Stockford | 7/12/2016 11:23 AM |